

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**091926547**

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1	1	1		
3		1				
4		3		1		
5		3		1		
6		3		1		
7		(1)				
8		(1)		1		
9		(1)		1		
10		1		1		
11		(1)		1		
12		1		1		
13		1		1		
14		1		1		
15		1		1		
16		1		1		
17		2		1		
18		1		1		
19		1		1		
20		1		1		
21		(1)		1		
22		(1)		1		
23		(1)		1		
24		(1)		1		
25		(1)		1		
26		1		1		
27		1		1		
28		(1)		1		
29		(1)		1		
30		(1)		1		
31		(1)		1		
32		(1)		1		
33		(1)		1		
34		(1)		1		
35		1		1		
36		(1)		1		
37		1		1		
38		(1)		1		
39		1		1		
40		1		1		
41		1		1		
42		1		1		
43		1		1		
44		2		1		
45		(1)		1		
46		(1)		1		
47		1		1		
48		(1)		1		
49		(1)		1		
50		1		1		
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		(1)				
52		(1)		1		
53		(1)		1		
54		(1)		1		
55		(1)		1		
56		(1)		1		
57		(1)		1		
58		1		1		
59		(1)		1		
60		(1)		1		
61		(1)		1		
62		(1)		1		
63		(1)		1		
64		(1)		1		
65		(1)		1		
66		(1)		1		
67		1		1		
68		1		1		
69		1		1		
70		(1)		1		
71		1		1		
72		1		1		
73		1		1		
74		(1)		1		
75		1		1		
76		(1)		1		
77		(1)		1		
78		1		1		
79		1		1		
80		1		1		
81		1		1		
82		(1)		1		
83		(1)		1		
84		(1)		1		
85		1		1		
86	1	1		1		
87		1		1		
88		2		1		
89		(1)		1		
90	1	1		1		
91		1		1		
92		1		1		
93		3		1		
94		(1)		1		
95		(1)		1		
96		(1)		1		
97		(1)		1		
98		(1)		1		
99		(1)		1		
100		(1)		1		
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

Barbara Campbell  
National Stage Processing  
(703) 305-3831

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FEE CALCULATION SHEET**  
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09/926547

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1C1		3				
1C2		1				
3						
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50						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		↓	44	↓		↓
TOTAL CLAIMS			46			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

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